The Cochin Midwives Registration Bill..

Mrs. D'Souza Williams (*Nominated*).— I move that the Bill for the Registration of midwives in the Cochin State may be read in Council. In doing so, I would like to bring to the notice of the Hon'ble Members that many a woman in our State has either lost her life or been in sick-bed for months together as the result of complications developed owing to the unscientific way in which maternity cases are being handled by untrained barbar midwives. Not only are the expectant mothers the victims of this crude and unscientific system of midwifery but hundreds of infant lives are being lost every year for want of proper antenatal care, diagnosis of the lie of the child in utero and by unscientific handling of labour cases. Even when the babies are born alive, their chances of survival are little owing to fever which the mother often developed as the result of the unclean methods of the barbar midvives. It is due to this heavy toll on maternal and infant lives caused by barbar midwives that legislation has already been passed in British Indian Provinces to control and minimise the risks of unscientific midwifery practice by the barbar midwives who have no qualification whatever for the profession.

Mr. Thomas Manjuran (*Government Advocate and Law Officer*).—Where is that legislation?

Mrs. D'Souza Williams (*Nominated*).—In Madras. Why, don't you know? It is really strange that the Law Member does not know it although the legislation there has been in force for the last 11 years.

During my long professional career I have had ample opportunities to come in contact with many a sad and heart-rending case of young expectant mothers brought into the hospital in a moribund condition too late even for the most skilled medical aid—but only to die within an hour or two. This occured because these unfortunate women had not the services of trained mid-wives but depended entirely upon the untrained barbar mid-wives. I have also seen many cases of young expectant mothers between the ages 15 and 36 lose their lives as the result of Eclampsia which could have been easily avoided by proper and efficient antenatal treatment. I have also come across many cases which reached the hospital after being in labour for a period varying from 36 to 72 hours and not been able to deliver on account of malposition of the foetus which no

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untrained midwife can diagnose. Again, I have come across several cases brought into the hospital in a collapsed condition due to ruptured uterus which occurs because the barbar midwives are unable to find out the abnormal lie of the child and get medical aid in time to relieve the condition.

Seeing for several years such cases of misery and loss of valuable lives, and realising the need for preventive legislation to control the risk of maternity caused by the barbar midwives, I sought to introduce this Bill in the last Meenam Meeting of the Council. I felt that I had a duty as a Doctor to the women of this State in this matter affecting their lives and health at the critical period of confinement.

After leave to introduce this Bill was granted to me by the House I lost no time in preparing and sending a questionnaire through the Chief Medical Officer to all the doctors of the State Hospitals, Dispensaries and Grant-in-aid dispensaries and through the Director of Panchayats and Public Health to all the medical officers working in that department. Besides I also sent the same questionnaire to all the medical practitioners of the State. I am happy to say that most of the doctors have replied and all of them are unanimously of opinion that a legislation for the registration of midwives in Cochin State is an urgent necessity. I may bring to the notice of the Hon'ble Members that my references as regards the risks of maternity caused by untrained barber midwives had been strengthened by the statistics supplied by the doctors. I have, therefore, great pleasure in moving that this Bill may be read in Council.

Mr. Thomas Manjuran *(Government Advocate and Law Officer).*—Sir, the Hon'ble Member for Medicine will presently deal with the real merits of the situation. But I venture to make a few remarks on what appears to me to be rather a peculiar feature of this bill in view of the speech made by the Hon'ble Member introducing the Bill. The Hon'ble lady Member stated that these untrained midwives are doing a lot of harm. She wants to prevent it—very desirable. Does this bill prevent it? That is the question. That is why I asked the question whether any bill to put down that evil was passed in the Madras Presidency or anywhere else. What is the use of having a Bill like this? This Bill will prohibit midwives with no diplomas or certificates from practice. I ask, does this Bill seek to put down the practice of Indian midwives? Does this Bill seek to put down the practice of Indian untrained midwives of their attending to labour cases?

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Dr. A. R. Menon (*Pallippuram*).—Why not? What is the object of registration?

Mr. Thomas Manjuran (*Government Advocate and Law Officer*).—It may be laudable if it were practicable. If it were practicable, I can understand a law being passed to the effect that nobody but trained midwives should practice. That is quite reasonable and logical. But the member has not cared to introduce such a provision in the Bill. It may be that this enthusiastic member who wants to put down this bad practice did not notice that fact. It must be she was confronted with a situation existing here to taboo any but qualified midwives holding diplomas, certificates from practising in Cochin. Is it meant by the Hon'ble Member that poor women who will never be able to have the services of such midwives need not be attended?

Mr. P. Kumaran Ezhuthassan (*Wadakkancheri*).—They should be attended by proper persons. That is the object.

Mr. Thomas Manjuran (*Government Advocate and Law Officer*).—Is it anybody's case that in Madras uncertified midwives do not practice today? You will find probably 5000 midwives in the Madras Presidency where the population is 40 million. Barely 5 or 6 per cent do practise as midwives.

Mr. K. Ayyappan (*Ezhuvas South*).—Is there any similar legislation in Madras?

Mr. Thomas Manjuran (*Government Advocate and Law Officer*).—There appears to exist one.

Mr. K. Ayyappan (*Ezhuvas South*).—Is there any penal clause in that legislation?

Mr. Thomas Manjuran (*Government Advocate and Law Officer*).—No. Government position is this: They have no objection to introduce an effective measure if there is an evil to be eradicated. Don't be under a mistaken impression. It is quite likely that such mischief will be done by indigenous midwives. You can stop it certainly, if the House is of that opinion. The Government will consider the question of taking action. But the Government have the strongest objection against launching a futile legislation. Because Government are aware that, although such a similar legislation has been in existence in Madras, it does not prohibit in the least untrained and uncertified midwives from practising there. We have to proceed

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npon experience. Does the Hon'ble Member who has brought forward this legislation think that even in the Madras Presidency where this law has been in existence for the last 10 years, the presence of such a legislation has prohibited in the least the existence of uncertified midwives? Government do not want to sponsor a futile piece of legislation.

Mr. K. M. Ibrahim (*Cranganur*).—We may get better results here.

Mr. Thomas Manjuran (*Government Advocate and Law Officer*).—There is no use. Hon'ble Members may be sure of that. For instance the same member introduces another bill and the Government is supporting the Bill because Government is satisfied that it will do some good. In Madras there is such a legislation and it has been of no practical utility. My point is this. Do not expect Government to sympathise with or encourage a Bill unless that Bill proves to be useful. Government as at present advised do not consider this Bill to be useful for the simple reason that it contains no sort of penal clause against unqualified and uncertified practitioners. Government will be delighted in eradicating the trouble from which these poor women will be suffering and Government are aware of their suffering. Hon'ble Members should remember that in the state of affairs that exists in Cochin it is out of the question? at any rate for several years to come, to have as many trained midwives as there is necessity. Government's anxiety is merely because they connot give a complete loaf, poor men should not go without even 1/4 loaf. So that, let the attitude of Government be not misunderstood. Supposing this bill could have been so modified in select committee as to provide for this contingency, viz. for the elimination of uncertified midwives, Hon'ble Members will say 'we will take in the select committee'. Government consider, in view of the basis with which this bill is introduced being an entirely voluntary one, it would be doing very great violence to all canons of select committee procedure to convert what is only a voluntary bill into a compulsory bill. You can never do that. If a compulsory bill is wanted introduce it by all means.

Section 3 of the Bill says:—

"(1) A Council called the 'Cochin Midwives' Council' shall be constituted for the State consisting of—

(a) the Chief Medical Officer, Cochin Government;
(b) the Director of Public Health;
(c) the Civil Surgeon, E. M. Maternity Hospital;

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(d) the Medical Officer, Women's Hospital ;

(e) two Registered Medical Practitioners, one of whom whenever available shall be a woman nominated by the Government ;

(f) two Sub-Assistant Surgeons, both women, nominated by the Government ;

(g) two Non-officials not of the classes referred to above, one of whom shall be a woman, nominated by the Government.

The Chief Medical Officer shall be the President of the Council.

Provided that—

(1) the members of the Council other than members ex-officio shall hold office for a term of 5 years.

(2) if the place of a member of the Council becomes vacant by the expiration of his term of office or by death, or by resignation or otherwise, the vacancy shall be filled in the manner provided for the filling of the vacancy by sub-section (1).

(3) an outgoing member of the Council shall be eligible for re-election or re-nomination.

(4) the powers of the Council may be exercised notwithstanding any vacancy in the Council."

Other sections read like this :—

4. "A member who fails to attend three consecutive meetings of the Council shall cease to be a member unless restored by the Council at its next meeting."

5. "The Council shall maintain a register of midwives and in each such register shall be entered in two separate parts—

(1) the names of all midwives who have undergone the course of training and passed the examinations and fulfilled the conditions prescribed,

(2) the names of all midwives practising in the Cochin State at the commencement of this Bill and not qualified to be registered under clause (1) who may be admitted to registration under such conditions and restrictions as may be prescribed :

Provided that no midwife may be registered under clause (2) after the expiration of two years from commencement of this Bill.'.

There is no term that any one of these should get their names registered before they begin to practice.

And so on and so forth. The barber midwives never come under private practitioners.

Now, by far the biggest majority of untrained midwives who go about practising on the road unfortunately will be the class who will have access to the poorest classes. How can you by maintaining any number of registered midwives in capital cities or elsewhere help the poor classes unless you have got some sort of quacks who alone reach the poor classes — the

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Pulaya, the Paraya, throughout the length and breadth of Cochin? How will you prevent those midwives practising in those places. It is imaginable at any rate that the Government should step in and see that such midwives shall not practise. But the question is whether it is now time for the Government to say that or for the Council to recommend that. We have 12 lakhs of people and there may be tens of thousand or probably hundreds of thousands facing labour pains without the chance of getting any registered midwives in the nooks and corners of the State. It may be true that there may not be any qualified midwives to attend on them. We can easily imagine the despair of the poorest women when confronted with the hour of delivery when she has to wait for a qualified midwife to be brought to her. Government are afraid that it is not possible at present to introduce any amount of compulsion. If the Hon'ble Member taking into consideration the existing realities of the situation suggests a method by which no poor women would be hurt, a method by which we can achieve this very desirable aim at the same time not having even the powers of the law, Government will support it to the best of their ability. With regard to the rest of arguments advanced, my Hon'ble friend here will continue.

Dr. D. Raghavendra Rao *(Chief Medical Officer).*— There has been a lot of heat. I shall give you some light. I fully sympathise with the noble, sympathetic sentiments of the lady member but let us see how far the bill as it stands will be useful for the public of Cochin, what the present position in Cochin is both in the urban as well as in the rural areas and then come to a decision whether the Bill as it stands has to be passed. What is the population of Cochin? What is the total number of births in a year? It will be a few thousands. Now how many are the midwives that are available? How many are the midwives that could be registered according to the classification that has been now brought forward.

Till about 21 years ago when the Edward Memorial Maternity hospital was started in Trichur training of midwives was never attempted in Cochin State and it is women who were trained in Raja Sir Ramaswamy Mudaliar's Hospital at Madras or Raja Mirasdar hospital at Tanjore or the Madras Maternity hospital that used to come and take service here. These women, invariably, though they were called trained midwives, had not much of general educational qualification to understand the aesthetic method of bequeathing. When midwife women went to Madras and had about six months' training, subsequently increased to one

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year, and came back they were taken on in some of the major hospitals like Trichur, Ernakulam and Mattancheri. Subsequent to that it was found that after the Edward Memorial hospital was started there was a great paucity of midwives in the State and the mischief done by the indigenous midwives was also so great that Dr. Coombes, who was then the Chief Medical Officer, started a new method of training in the Maternity Hospital, Trichur and after the training sent them out to their own villages giving them a small subsidy of rupee one per case. This worked for some time, though I must confess they were incapable of receiving any training. The class of women who were taking to midwifery were incapable of understanding with the result that we see them just like primary education going back to illiteracy. These women, when they went back to the villages, instead of following modern methods started their own old way. I don't say that there may not be a few among them who did not take advantage of the training but the majority of them turned back to their old illiterate and ignorant ways. Then a new system was introduced. That was to take women with a certain amount of education and train them for a year. We started taking ten every year and trained them in the maternity hospital at Trichur as well as in the women's hospital at Mattancheri. This has been going on for the last 10 or 12 years. At present we have got 53 midwives on the establishment in the Medical Department, who are attached to the hospitals, to the dispensaries and to the grant-in-aid dispensaries. Over and above these 53 midwives we may have about 8 or 10 or perhaps 20 at the most who are in the employ of Municipal Councils. The present policy is that the Public Health Department picks up these women from the villages each year, trains them for a year and sends them out to their villages. Even among these women the idea of this training is not for going and settling in the villages for practice but every one of them wants to get a job under the Government. It has been impossible for the Government to absorb all these women. Just at present several of the Panchayats have been clamouring to have a midwife attached to their Panchayat. No doubt it would be some improvement but at the same time it would only touch the fringe. I have also to bring to the notice of this House that in spite of the midwife existing in these rural areas the work turned out by the passed midwife is comparatively very little compared to the work that is turned out by the indigenous midwife who has been born and bred up and who has taken this as a profession. In almost all these rural dispensaries—there are 18 or 19 rural dispensaries—we have got a

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midwife and we find that during the whole year it is only about two or three cases usually attended to by these midwives, though the number of labouring cases must be perhaps 50 or 60. This only shows that in spite of having midwives, the people resort to indigenous midwives. As a matter of fact, even in Ernakulam though there are three or four and about an equal number in the general hospital we find that the number of cases attended to is only about 700 a year. The major portion of the births are attended even in the town of Ernakulam by indigenous midwives.

Mr. P. Kumaran Ezhuthassan *(Wadakkancheri).*—What is the reason for it?

Dr. D. Raghavendra Rao *(Chief Medical Officer).*—Amongst the better class they do go in for the educated class. These people demand some remuneration. I may tell you that there has been a strict circular issued to every midwife that she is to treat free. We cannot change the national trait. What I have to state is this. We are simply placing this Bill on the Statute Book. Will it do any good to the people for the simple fact that this Bill does not restrict unqualified midwives practising.

Mr. P. Kumaran Ezhuthassan *(Wadakkancheri).*—On a point of information. It has been stated that in villages only two or three cases are attended. Will you please tell us the reason why?

Dr. D. Raghavendra Rao *(Chief Medical Officer).*—In some places it is not even two or three. The public of the place do not take to her. Not that they are not available but that these trained midwives are not called.

* **Dr. A. R. Menon** *(Pallippuram).*—We have listened with great interest to the speech that was delivered by the members on the other side representing the Government and they have succeeded to make out a case that if this Bill is passed, the poor people of this country will be put to great trouble. They have tried to influence this House by harping upon that one tune that the poor people will be put to very great trouble if this Bill is passed through. At least it has created that impression in my mind.

Mr. Thomas Manjuran *(Government Advocate and Law Officer).*—I am not responsible.

* Speech not corrected by the Hon'ble Member.

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Dr. A. R. Menon *(Pallippuram).*—But your speech was responsible.

One began and the other completed. Taking the two together, they want to create an impression that this Bill introduced by an equally competent Member as any of you on the subject is a piece of legislation which is going to produce great hardship to the poor people of this land.

Mr. Thomas Manjuran *(Government Advocate and Law Officer).*—It cannot produce any good.

Dr. A. R. Menon *(Pallippuram).*—If the passing of this measure will not do any harm to the people half of my labour is over. Government then said that if you register the names and if the registered midwives should attend to labour cases there will not be sufficient midwives to go round and unless some penal clause is appended to it this Bill becomes inactive, this Bill becomes futile, this Bill becomes worthless. Now, Sir, by the same argument we could see that in a country where there are medical practitioners, though there are persons having the degrees of M.B.B.S., L.R.C.P., etc. ninety per cent of the cases are attended to by Panchayat vaidyans or unqualified vaidyans. For that reason, you do not say that the registration of a Medical Graduate is out of place.

Dr. D. Raghavendra Rao *(Chief Medical Officer).*—Consistently with this idea Government turned down the Medical Registration Bill. There was a Bill on the anvil, when the same aspect was pointed out. What is the use of registering if you allow so called Unani and other vaidyans to treat you?

Dr. A. R. Menon *(Pallippuram).*—That shows colossal ignorance. Registration is not necessary for people to be allowed to practise. There is Registration in England. But any one can practise medicine. Therefore it is not necessary that a man must be registered in order to be allowed to practise. You have no idea of what it is.

Now, Sir, what are the provisions of this Bill? This Bill enables a committee to examine the efficient and necessary knowledge in conducting labour cases and if this committee is satisfied, a certificate will be given which will enable them to carry on their practice. It will so happen, in course of time, that people in a locality who know that there is a registered midwife will think that it would be safer to entrust that case to that registered medical practitioner. It does not prevent any

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one else, for the time being, to practice midwifery and to attend labour cases. But as soon as we are in a position to see that there is sufficient number of them to go round a penal clause must be inserted restricting the practice of midwifery by unregistered practitioners. Does the House realise the mischief done by these people? A number of people die on account of these. I am surprised, Sir, that the Head of the Medical Department should be compelled by Government. . . .

Dr. D. Raghavendra Rao *(Chief Medical Officer).*—I am not compelled.

Dr. A. R. Menon *(Pallippuram).*—Then I am really sorry that you have come forward to put forward such an opposition knowing fully well what is being done by these unauthorised midwives bungling and meddling with labour cases. Within 3 weeks there were 4 cases fighting for life. Every medical man knows what is taking place. But the Chief Medical Officer does not know it. That is the difficulty. If this Bill will not be effective make it more effective. We are going to make it more effective. I expect to be a member of that committee. Now, Sir, there is a pronouncement by the Government of India. It is nothing new. The Government of India appointed a committee to study this question and they have made the following recommendation. They, a very responsible body of men, made this recommendation that in their opinion it is essential to appoint qualified midwives, within a radius of 10 miles at least all over India and the Government may give them a grant, a honorarium. What is the extent of this small State? It will be 900 square miles. Put one for 5 square miles and how many will it come to? It will come to 180. That is, the pay of one Government Official will be sufficent to maintain 200 midwives for the whole of Cochin State. Which is more useful, a Head of a Department or 200 midwives? At the rate of Rs. 15 per mensem, the allowance of 200 midwives comes to Rs. 36,000 a year. Put it at Rs. 50,000. Is this 50,000 too much to look after the women of this State? This is a harmless Bill. Certainly, this Bill demands further modification. But I am surprised, Sir, when a civilised Government comes forward and offers unqualified opposition that the bill is not strong. You can make it strong enough. They say we are not going to make it strong and since it is not strong it is futile. Because it is futile, this Bill is of no use. Therefore we oppose. That is the sum and substance. We refuse to make it a workable thing since it is not strong. You spend three and four lakhs of rupees for supporting half a dozen people. You may spend it. But when it

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comes to a real necessity, the Government comes forward on flimsy grounds. It will be very difficult to control one's own temper. I am sorry, Sir, that you are laughing. I am really sorry that the Chief Medical Officer of this State came forward to oppose this proposition. Are you going to say that we want a large number of midwives on the register so that the Council may introduce this measure. There is a method in our madness.

Sir, this measure is a harmless one. I do not know what the Government means by opposing. It is because they do not know the provisions of this Bill. You may rest assured, as you know me, that this Bill is not going to do any harm to the poorest and the humblest subjects. This Bill will be a blessing to those women when they pass through the greatest ordeal that any human being has to pass through in this world.

* **Mr. M. Sivarama Menon** *(Ernakulam South).*—I heartily support this Bill. None of the arguments advanced from the Treasury Benches are in any way effective to the plain question that is before the Hon'ble House. It is perfectly true to say that human nature will in most cases have a liking to go to that midwife, even though untrained, whose services were requisitioned before. Such a state of things occurs even in this municipality at a time when 4 midwives are entertained by this municipality. You know that we can boast of a very efficient hospital in this capital of the town where labour cases are attended to very promptly and very efficiently. Yet in spite of the excellent services, as years passed by, it was found that these municipality midwives were being requisitioned by people on a larger and larger scale so that now people have begun to realise that it is very unwise to go to quacks and therefore they are being called in more often than they used to do, so that this bill has an educative value.

Secondly this has got a propagandist value, because when the people in the country parts realise that as a matter of fact there is danger attendant upon calling any untrained midwife especially when they see the board which contains "Registered Midwife" and so on they will begin to attach some sort of importance to the qualification. That at least the board will proclaim and in that way in course of time every one will learn to go to the registered midwife and not to the country midwife. So that from the stand point of educative value this bill will also tend to create an impression that every household should have an efficient midwife. But that can be attained in course of

* Speech not corrected by the Hon'ble Member.

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time. Added on to them there are now the activities of the Department of Public Health. If an attempt is made by them to spread this idea in all the parts either by way of cinema shows or by lectures or other means of propaganda by issuing leaflets, etc. it is up to them and in their own interests to seek the aid of these qualified midwives. Then certain as anything in course of time a coordination of the activities of the Public Health Department will also go a great way to make the people realise the desirability of calling in trained midwives. It may be that we may not be in a position to penalise the practice of midwifery by untrained midwives for some time to come till the State is in a position to put into the field a sufficient number of trained midwives. Till that day, we cannot penalise a midwife without training. But when once you find as a matter of fact that the State is ready to take up that burden, the services of qualified midwives should be extended by providing them for every 3 miles. Even if that has to be so, no amount should be stinted for that purpose. It should be usefully spent and spent with all the grace from the coffers and we must find funds for that. What I bring to the notice of the Hon'ble House is that we cannot do it all on a sudden, tomorrow or the day after. But within a short time we shall be able to achieve that. Half a lakh of rupees spread within the course of another 3 years may not be too much for the State, regard being had to the vital question that ought to be looked into. Therefore my appeal to the Hon'ble Members of this House is with the little experience that I have in the municipal administration to say to all the people that country midwives are far below the mark. People will certainly realise the advantages of the trained midwives, if only it is made available to them.

മിസ്സിസ്സ് മീനാക്ഷി എൻ. മേനോൻ (*Nominated*).— സർ, ഞാൻ ഈ ബില്ലിനെ ഹാർട്ടായി പിൻതാങ്ങുന്നു. ഈ ബിൽ ഇവിടെ അവതരിപ്പിച്ചപ്പോൾ ബഹുമാനപ്പെട്ട ലാ മെമ്പറും ചീഫ് മെഡിക്കൽ ആഫീസറും പറഞ്ഞ വാദങ്ങൾ കേട്ടതിൽനിന്ന് ഇതിനെ എതിർക്കത്തക്ക ശക്തിയായ കാരണങ്ങളൊന്നും പറഞ്ഞതായി തോന്നുന്നില്ല. ഒന്നാമതായിട്ട ഗവമ്മെൻറ് ഇതിനെ സിമ്പതിറ്റിക്കായിട്ട ആലോചിക്കണമെന്നാണ് ഞാൻ പറയുന്നത്. ഈ ബിൽ ഇവിടെ കൊണ്ടുവന്നിട്ടുള്ളത് ഒരു വലിയ ലോയറല്ല, ഈ ബില്ലിൽ വിവരിച്ച മാതിരി സങ്കടങ്ങൾ അനുഭവിച്ചിട്ടുള്ള സ്ത്രീകളോട് കൂടുതൽ ഇടപെട്ട പരിചയമുള്ള ഒരാളാണ്. അങ്ങിനെയുള്ള സ്ത്രീകളുടെ സങ്കടങ്ങൾക്ക് നിവാരണം ചെയ്യണമെന്നുള്ള ആഗ്രഹത്തോടുകൂടിയാണ് ഈ ബിൽ ഇവിടെ കൊണ്ടുവന്നിരിക്കുന്നത്. ഇതിൽ ലീഗലായിട്ട എന്തെങ്കിലും കുറവുണ്ടെങ്കിൽ അത് ബഹുമാനപ്പെട്ട ഗവമ്മെൻറ് തിരുത്തി

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ഞങ്ങൾക്ക വേണ്ട സഹായംചെയ്യ തരേണ്ടതു അത്യാവശ്യമാണ്. ഇ ങ്ങിനെയുള്ള ബില്ലുകൾകൊണ്ട് യാതൊരാവശ്യവുമില്ല. ഇങ്ങിനെയുള്ള ബില്ലുകൾ നിയമസഭയിൽ കൊണ്ടുവന്നാൽ ഗവമ്മെണ്ട് അതിനെ അംഗീകരിക്കുകയില്ലെന്നു പറയുന്നതു വളരെ തെറ്റാണെന്നാണു ഞാൻ പറയുന്നതു്. ഗവമ്മെൻറിന്റെ മറുപടിയിൽനിന്നും എനിക്ക മനസ്സിലായതു്, പ്രത്യേക പരിശീലനം നൽകാത്ത മിഡ്വൈഫ്സിനു പ്രാക്ടീസ് ചെയ്യുന്നതിനെ തടയുന്നതിന്നു് ഈ ബില്ലിൽ യാതൊന്നുമില്ലെന്നും, വെറുതെ രജിസ്ട്രേഷൻ മാത്രമെ ഈ ബില്ലിൽ ഉള്ളൂ എന്നും പറയുന്നതുകൊണ്ടു മാത്രമാണു് ഗവമ്മെൻറു ഈ ബില്ലിനെ എതിൿക്കുന്നതു് എന്നാണു്. അങ്ങിനെയാണെങ്കിൽ, സ്ത്രീകളുടെ കഷ്ടപ്പാടുകൾക്ക എന്തെങ്കിലും ഒരു നിവാരണം ചെയ്യുന്നതിനു ബഹുമാനപ്പെട്ട ഗവമ്മെൻറു, ഇതിൽ ഇല്ലാത്ത ഭാഗങ്ങൾ കൂട്ടിച്ചേർത്തു് ഞങ്ങൾക്ക വേണ്ട സഹായങ്ങൾചെയ്യ ഈ ബില്ലിനെ പാസ്സാക്കുവാൻ ഉത്സാഹിക്കണമെന്നു് ഞാൻ അപേക്ഷിക്കുന്നു.

പബ്ളിക്ക ഹെൽത്തു് ഡിപ്പാർട്ടുമെൻറിൽനിന്നും, മെഡിക്കൽ ഡിപ്പാർട്ടുമെൻറിൽനിന്നും ഇത്ര നാളായിട്ടും പരിശീലനം നേടീട്ടുള്ള മിഡ്വൈഫ്സു വളരെ ചുരുക്കമാണു്. അതുകൊണ്ടു് ബാക്കിയുള്ള സ്ഥലങ്ങളിൽ പ്രസവ ശുശ്രൂഷയില്ലാതെ സാധുക്കളായ സ്ത്രീകൾ വളരെ സങ്കടങ്ങൾ അനുഭവിക്കേണ്ടിവരുന്നുണ്ടു്. എന്നാൽ അവക്കെല്ലാം ശുശ്രൂഷ നൽകുന്നതിനു പരിശീലനം കഴിഞ്ഞ മിഡ്വൈഫ്സു ഈ നാട്ടിൽ അത്രയധികം ഇല്ലെന്നാണു ചീഫ് മെഡിക്കൽ ആഫീസർ പറയുന്നതു്. ഇതിൽനിന്നുതന്നെ ഇപ്പോഴുള്ളവർ ഇൻറിജനസ് മിഡ്വൈഫ്സിനെയാണു് ആശ്രയിയ്ക്കുന്നതെന്നു് അദ്ദേഹംതന്നെ വിശ്വസിക്കുന്നുണ്ടു്. ഇതിനു ഓരോ വില്ലേജുകളിൽ നിയമിക്കുവാനുള്ള ആളെ ഇല്ലെന്നുള്ള കാരണംകൊണ്ടാണു് അദ്ദേഹം ഇതിനെ എതിൿക്കുന്നതു്. മെഡിക്കൽ ഡിപ്പാർട്ടുമെണ്ടിൽനിന്നും ഹെൽത്തു ഡിപ്പാർട്ടുമെണ്ടിൽനിന്നും ഇപ്പോൾ ന്യ ആളെവീതമാണു് പരിശീലനം കഴിച്ചു വിടുന്നതു്. ഇങ്ങിനെ നോക്കുകയാണെങ്കിൽ എത്ര കൊല്ലംകൊണ്ടാണു് ഇതിനു വേണ്ട ആളുകളെ ഇവിടെ പരിശീലനം നൽകുവാൻ സാധിക്കുന്നതു്. അതുകൊണ്ടു് ആ കാലംവരെ കാത്തിരിക്കാൻ തരമില്ല. ഗവമ്മെൻറും ബഹുമാനപ്പെട്ട അനുദ്യോഗസ്ഥ സാമാജികന്മാരും ഈ ബില്ലിനെക്കുറിച്ചും, ഈ ബില്ലുകൊണ്ടു സാധിക്കാവുന്ന സംഗതിയെക്കുറിച്ചും എന്തുദ്ദേശത്തോടുകൂടിയാണു് ഈ ബിൽ ഇവിടെ കൊണ്ടുവന്നിരിക്കുന്നതു് എന്നുള്ളതിനെക്കുറിച്ചും ആലോചിച്ചു നോക്കുന്നതായാൽ ഇതിനെ ആരും എതിൿക്കുമെന്നു ഞാൻ വിചാരിക്കുന്നില്ല. അതുകൊണ്ടു് ഇതിൽ ലീഗലായിട്ട വല്ല തെറ്റും ഉണ്ടെങ്കിൽതന്നെ അതു ഗവമ്മെൻറു പരിഹരിക്കേണ്ടതാണു്. പിന്നെ ഇതിൽ ഒന്നുള്ളതു് പണച്ചിലവു വരുമെന്നും ഇപ്പോൾ പണം കുറവാണു് എന്നുമായിരിക്കാം. പക്ഷെ അതു സാരമില്ല. അതുകൊണ്ടു്, വല്ലതരത്തിലും ഇതിനെ പ്രാ

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യോഗികമാക്കി, എത്രയും ആവശ്യകരമായ ഈ ബില്ലിനെ പാസാക്കുവാൻ ഞങ്ങളെ സഹായിക്കുകയും, ഇതിനു വല്ല നിയമതടസ്ഥവുമുണ്ടെങ്കിൽ അതു തീർക്കുവാൻ ഗവമ്മെൻറു് പ്രത്യേകം ശ്രദ്ധിക്കുകയും ചെയ്യണമെന്നാണു് ഞാനപേക്ഷിക്കുന്നതു്.

മിസ്റ്റർ കെ. അയ്യപ്പൻ (*Ezhuvas South*).— സർ, ഈ ബില്ലിനെ എതിർക്കുവാൻ ഗവമ്മെൻറിനു കിട്ടിയ വിദഗ്ധാഭിപ്രായം എവിടെനിന്നാണെന്നുള്ളതിനെപ്പറ്റി ആലോചിച്ചതിൽ പല സംശയങ്ങളും തോന്നുന്നുണ്ടു്. മെഡിക്കൽമെമ്പർ തീർച്ചയായും ഇതിനു ഒരു എതിരായ അഭിപ്രായം എടുക്കുവാൻ ഇടയില്ല. ലോ മെമ്പറും എടുക്കുവാനില്ല. പിന്നെ ഞാൻ ആലോചിച്ചതിൽ ഈ അഭിപ്രായം ഫിനാൻസ് മെമ്പർ കൊടുത്തതായിരിക്കണമെന്നാണു് എനിക്കു തോന്നുന്നതു്. ഈ ബിൽ സ്വീകരിച്ചു നിയമമാക്കിയാൽ ഗവമ്മെൻറിനു വലിയ പണച്ചിലവു ചെയ്യേണ്ട ബാദ്ധ്യതവരും എന്നുള്ള കാരണം ഗവമ്മെൻറു മുൻകൂട്ടി കണ്ടതുകൊണ്ടു മാത്രമാണു് ഇതിനെ എതിർക്കുന്നതു്; അല്ലാതെ വേറെ ഒരു കാരണംകൊണ്ടും ഇതിനെ എതിർക്കാൻ സാധിക്കുകയില്ല. മദ്രാസ്സിൽ ഫ്രൻചൈസ-ൽ ഇതിൽനിന്നും വളരെ വ്യത്യസ്തമല്ലാത്ത ഒരു ആക്ടു് പാസ്സായിട്ടുണ്ടു്. ട്രൻസ്പർ-ൽ അതിനു ഒരു ഭേദഗതിയുമുണ്ടായി. ഇപ്പോൾ ഇവിടെ അവതരിപ്പിച്ചിട്ടുള്ള ഈ ബിൽ അതിൽനിന്നു വളരെ വ്യത്യാസപ്പെട്ട ഒന്നല്ല. ഗവമ്മെൻറു അഡ്വക്കേറ്റിനു ഈ ബിൽ അവതരിപ്പിച്ച മെമ്പറോടു ഒരു വിരോധമുള്ളതു്, ഈ ബില്ലിനെ എതിർക്കുവാൻതക്ക സമയം കൊടുത്തിട്ടില്ല എന്നുള്ളതുകൊണ്ടാണു്. ഒരു പീനൽ ക്ലാസ് ഇതിനു വച്ചിരുന്നെങ്കിൽ അതെങ്കിലും പറഞ്ഞുകൊണ്ടു് അദ്ദേഹത്തിനു എതിർക്കാമായിരുന്നു. ഈ രാജ്യത്തെ തൽക്കാല സ്ഥിതിയനുസരിച്ചു അതു പ്രായോഗികമല്ലെന്നു് ഈ ബിൽ അവതരിപ്പിച്ച മെമ്പർക്കു ബോദ്ധ്യമുള്ളതുകൊണ്ടാണു് അതു ഇതിൽ ചേർക്കാതിരുന്നതു് എന്നാണു് ഞാൻ വിചാരിക്കുന്നതു്. മെഡിക്കൽ മെമ്പർ ഇതിനെ എതിർത്തതു എവിടന്നോ കിട്ടിയ ഉപദേശം കൊണ്ടാണു്. ഈ ബില്ലുമായി യാതൊരു ബന്ധവുമില്ലാത്ത അഭിപ്രായങ്ങൾ പറഞ്ഞാണു് അദ്ദേഹം ഇതിനെ എതിർക്കുന്നതു്. ഇപ്പോൾ മെഡിക്കൽ മെമ്പർ ഇതിനു ഒരു വിദഗ്ധാഭിപ്രായം കൊടുക്കുകയാണെങ്കിൽ ഈ ബില്ലിനെതിരായി പറയാൻ നിവൃത്തിയില്ല, എന്നാൽ ഗവമ്മെൻറു ഇതിനെ എതിർക്കണമെന്നു വിചാരിച്ചതുകൊണ്ടു മാത്രമാണു് അദ്ദേഹം ഇതിനെ എതിർത്തതു്.

ഇനി ഒരു സംഗതി ഗവമ്മെൻറു അഡ്വക്കേറ്റിനോടു പറയുവാനുള്ളതു് ഇവിടെ അവതരിപ്പിക്കുന്ന ബില്ലുകളുടെ പ്രിൻസിപ്പിളിനെപ്പറ്റി വിചാരണ നടത്തുന്ന അവസരത്തിൽ ഗവമ്മെൻറു അഡ്വക്കേറ്റു അതിന്റെ ഡീറ്റയിൽസിനെപ്പറ്റി അനാവശ്യമായ വാദങ്ങൾ നടത്തുവാൻ പാടില്ലെന്നാണു്. പല ബില്ലുകളേയും അനാവശ്യമായി, ഗവമ്മെ

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ൻറു അഡ്വക്കേറ്റും, ഗവൺമെൻറും എതിർത്തു് ഈ സഭയുടെ സമയം വെറുതെ കളയുന്നതു പാർലിമെൻറു ഹൗസ് റൂൾസിൻെറ പ്രധാന തത്വം അറിയാത്തതുകൊണ്ടാണു്. ഈ ബില്ലിൻെറ തത്വം ഇവിടെ അംഗീകരിക്കാൻ പാടുള്ളതോ, അല്ലയോ എന്നു മാത്രമേ പറയേണ്ടതുള്ളൂ.

മിസ്റ്റർ തോമസ് മാഞ്ഞൂരാൻ (*Government Advocate and Law Officer*).— അതു മാത്രമേ ഇവിടെ പറഞ്ഞിട്ടുള്ളൂ.

മിസ്റ്റർ കെ. അയ്യപ്പൻ (*Ezhuvas South*).— ഈ വക കാര്യങ്ങളിൽ ശാസ്ത്രീയമായ പരിജ്ഞാനമില്ലാത്ത ആളുകൾ ഏർപ്പെട്ടിരിക്കുന്നതുകൊണ്ടു് വലിയ ദോഷങ്ങൾ ഉണ്ടാകുമെന്നുള്ളതു ഇവിടെ എല്ലാവരും സമ്മതിച്ചുകഴിഞ്ഞു. ഇപ്പോൾ നാട്ടു വയറ്റാട്ടികളെ തടയാൻ സാധിക്കുമോ? വാസ്തവത്തിൽ തടയാൻ സാധിക്കയില്ല. തടഞ്ഞാൽ ദോഷം വരികയില്ല. ഈ വയറ്റാട്ടികൾ ചെന്നാൽ ഉപദ്രവമുണ്ടാക്കുകയല്ലാതെ യാതൊരു സഹായവുമില്ല. എങ്കിലും ജനങ്ങൾ സമ്മതിക്കുകയില്ല. വാസ്തവത്തിൽ പ്രസവിക്കുന്നവർക്കു വയറ്റാട്ടികളുടെ സഹായമല്ല, പ്രകൃതിമാതാവിൻെറ സഹായമാണു് അധികമായുണ്ടാകുന്നതു്. പ്രകൃതി മാതാവിനു വിട്ടുകൊടുത്തതിനുശേഷം അവസാനത്തിൽ, നമ്മുടെ മാതാവിനെ രക്ഷിക്കുവാൻ ഡാക്ടർ വല്ലതും ചെയ്യണമെന്നു മാത്രമേ പറയുന്നുള്ളൂ. ജനങ്ങൾ ഈ പരിചയത്തിൽ മുഴുകിയിരിക്കുന്നതുകൊണ്ടു് ഇതിനെ എളുപ്പത്തിൽ പ്രായോഗികമാക്കുവാൻ സാധിച്ചില്ലെന്നുവരാം. കുറെക്കാലംകൊണ്ടുമാത്രമെ ഇതു തടയാൻ സാധിക്കുകയുള്ളൂ. ഈ വക സംഗതികൾ വച്ചുനോക്കിയാൽ ഈ ബിൽ പാസ്സാക്കുന്നതുകൊണ്ടു ഗവൺമെൻറിനു യാതൊരു ദോഷവും വരാനില്ല. പിന്നെ ഇതിൽ വരാനുള്ള ഒരു ദോഷം പണച്ചിലവു വരുമെന്നുള്ളതാണു്. അതു സഹിക്കണം.

മിസ്റ്റർ തോമസ്സ് മാഞ്ഞൂരാൻ (*Government Advocate and Law Officer*).— രജിസ്റ്റർ ചെയ്യുന്നതിൽ എന്താണു പണച്ചിലവു്?

മിസ്റ്റർ കെ. അയ്യപ്പൻ (*Ezhuvas South*).— എന്താണു് രജിസ്റ്റർ ചെയ്യുന്നതിനു പണച്ചിലവു് എന്നു ചോദിച്ചതിൽനിന്നുതന്നെ ഗവൺമെൻറു് അഡ്വക്കേറ്റിനു ഈ ബില്ലിൻെറ തത്വം മനസ്സിലായിട്ടില്ല; അദ്ദേഹം ഈ വക സംഗതികളെപ്പറ്റി യാതൊരാലോചനയും ചെയ്തിട്ടില്ല. ഇതു നടപ്പാക്കിയാൽ പണച്ചിലവു വരും എന്നുമാത്രം അദ്ദേഹം മനസ്സിലാക്കി. അതുകൊണ്ടു് ഗവൺമെൻറു ഈ ബില്ലിനെ എതിർക്കേണ്ട ആവശ്യമില്ല. മദ്രാസ്സിൽ, ഇതിലും വലിയ മെഡിക്കൽ മെമ്പറും, ഇതിലും വലിയ ഗവൺമെൻറു് അഡ്വക്കേറ്റും, ഇതിലും വലിയ ഉൽബുദ്ധമായ പൊതുജനാഭിപ്രായവും ഉണ്ടെന്നറിയപ്പെടുന്ന സ്ഥലത്തു് ഇതു പാസ്സാക്കുകയുണ്ടായി. രു കൊല്ലം കഴിഞ്ഞതിനുശേഷം അതിൽ ഒരു ഭേദഗതിയും വരുത്തി. ഇങ്ങിനെ ഒരു പാരമ്പര്യവും, ചരിത്രവുമു

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ള്ള ഒരു നിയമനിർമ്മാണം, കൊച്ചിയിലെ മെഡിക്കൽ മെമ്പറും, ഗവർമ്മെൻറ് അഡ്വക്കേറ്റും, ഇവിടത്തെ പൊതുജനാഭിപ്രായത്തെ എതിർക്കുകയാണെങ്കിൽ, പൊതുജനദൃഷ്ടിയിൽ നിങ്ങൾതന്നെ നിങ്ങളുടെ മുഖത്തു കരി തേക്കുകയാണെന്നോർക്കണം. ചിലവു ഇപ്പോൾ ഒന്നും വരികയില്ല.

മിസ്റ്റർ തോമസ് മാത്തൂരാൻ (*Government Advocate and Law Officer*) — ഇല്ല, ചിലവു വരുകയില്ല.

മിസ്റ്റർ കെ. അയ്യപ്പൻ (*Ezhuvas South*).— ചിലവു വരും, ഇതിന്റെ തത്വം ഗവർമ്മെൻറ് അഡ്വക്കേറ്റിന്നു മനസ്സിലായിട്ടില്ല. മെഡിക്കൽ മെമ്പറിന്നു മനസ്സിലായിട്ടുണ്ടോ? ചിലവുവരും, ചിലവു വരാതെ നിവൃത്തിയില്ല. ഗവർമ്മെണ്ടു ഈ തത്വം സ്വീകരിച്ചുകഴിഞ്ഞാൽ, ഞങ്ങളെ ഈ കാര്യത്തിൽ സഹായിക്കുന്നു എന്നു പറഞ്ഞാൽ പിന്നെ കൊടുങ്ങല്ലൂർ മെമ്പർ ഇതു നടപ്പാക്കിയോ, നടപ്പാക്കിയോ എന്നു ചോദിച്ചുതുടങ്ങും. ഒരു സെഷനിലോ മറേറാ ഇതു ആലോചനയിൽ ഇരിക്കുന്നു എന്നു പറയാൻ സാധിക്കും.; അല്ലാതെ എന്നും അതുത്തരം പറയാൻ സാധിക്കുകയില്ല. ഇതു നടപ്പാക്കിക്കഴിഞ്ഞാൽ സർവ്വ വേലകളും ചെയ്യേണ്ടിവരും. അപ്പോൾ പണവും ചിലവുവരും; അതാണു പണച്ചിലവു വരുമെന്നു പറഞ്ഞതു്. എന്നാൽ അതു് ഇപ്പോഴെങ്കും വേണ്ടിവരികയില്ല. അതുകൊണ്ടു് അത്യാവശ്യമായതും, വളരെ പ്രയോജനകരമായിട്ടുള്ളതും, അടുത്തതന്നെ ഗവർമ്മെൻറിന്നു യാതൊരു വിഷമമില്ലാത്തതും, ഭാവിയിൽ പൊതുവെ രാജ്യത്തിന്നു ഗുണകരമായതും ആയ ഈ നിയമനിർമ്മാണത്തെ നിങ്ങൾ അനുകൂലിക്കണമെന്നാണു് എനിക്കു പറയാനുള്ളതു്.

Mr. P. Kumaran Ezhuthassan (*Wadakkancheri*).—Mr. President, Sir, I wholeheartedly support the motion for the introduction of this Bill and for its reference to a Select Committee. The fact that these indigenous, untrained midwives are attending labour cases has been admitted by the Government. Most of these midwives are unclean in their ways and they make the cases more complicated by mishandling are also admitted by Government. Their attendance brings about complications with the result that at times the death of the child and the mother occurs has also to be admitted. These are facts admitted or conceded by the Goverment. Therefore the necessity for some method of preventing such mishandling of labour cases by these professional indigenous, unclean midwives is strongly made out. The only question is how far it is possible to do it, and how far this Bill seeks to remedy that evil. The main point of attack directed against the Bill by the Government spokesmen is that this is not useful to achieve that end. The Hon'ble the Government Advocate was asking us how far

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this Bill is useful to achieve this end. I must confess, Sir, that the Bill does not provide for the preventing of indigenous midwives from attending labour cases. That defect is there but you will find, Sir, from a reading of the statement of objects and reasons attached to the Bill that the idea was thought of but the mover of the Bill did not make appropriate provisions for achieving that end in the body of the Bill. The House may be pleased to go through the last but one sentence of the Statement of Objects and Reasons which says :"It has therefore become necessary to enact that only trained and registered midwives shall attend labour cases. Hence the Bill ". If that object aimed at in the last but one sentence of the statement of objects and reasons attached to the Bill has been included by making appropriate provisions in the body of the Bill certainly that charge levelled by the Government now to the effect that this Bill is infructuous cannot and will not be made. It is intended by the Bill that only trained midwives who are registered should attend labour cases.

Mr. Thomas Manjuran *(Government Advocate and Law Officer).*—But this has nothing to do with the Bill.

Mr. P. Kumaran Ezhuthassan *(Wadakkancheri).*—I do not think that the statement of objects and reasons stands independently of the Bill or the Bill stands independently of the former. In the statement of objects and reasons the purport of the Bill is stated but it is not carried into effect in the body of the Bill. If that is the only point of objection then with your experience of drafting and with the help of other persons who are competent to help you, please make that provision there and make it effective. But the real difficulty however is not that. The difficulty is how far this provision, viz., only trained midwives shall attend labour cases, can be worked up. That is the proposition. For successfully tackling this question the Government have to supply the necessary number of midwives to attend to the labour cases that will occur in towns as well as in the rural parts, throughout the country. How far this is possible is the first question on which we have to bestow our attention. I am of opinion that there is no difficulty to achieve that object but the real question is only one of finance.

From the Government I have understood that there are at present more than 200 trained midwives scattered throughout the State. The present practice is said to be to train a number of hands every year in the Trichur Hospital and the Cochin Hospital. If the difficulty is one of want of hands it is not

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very difficult to have the required number of hands in the course of a few years. The greatest difficulty as I submitted before is one of funds. I say that the question of finances should not and cannot stand in the way of this because it is a very urgent and crying necessity. You have simply to stop your vagaries, simply to stop your luxuries of spending money upon non-urgent if not unnecessary things like the beautification of towns and things like that. If you only open the pages of the budget of this year you will find that you have provided funds for very many things which are not at all of an urgent nature. If you have got the mind to find funds then you can find it. Any honest man if he looks into the budget of this year can find that funds have been alloted for very many works which can lie over for many years and be taken up in years of plenty. The fund set apart for such works can very well be utilised fer urgent and absolutely necessary things like the one before the House or as suggested here by some Hon'ble Member you can have a plan spread over a number of years if you cannot find funds all at once and you can reach the millenium that is wanted here. The only thing is that the Government will have to make up its mind and make a beginning. The only ground on which you can oppose this motion is that it is a measure intended to give relief to the poor at the most critical moment of their life. But will the Government do it on that ground? Certainly not. They have also their sympathy towards the poor. They may say that the measure is an impracticable one. Large amounts of money will be required to put the measure through. But don't be afraid on the score of money. Let us try to spend our money upon necessary things. Why don't you get up and say that you voluntarily agree to a reduction of salaries? I ask this question to Hon'ble Members of the treasury benches. Are you not Cochinites? Don't you feel for the poor villagers? Why do you want your Rs. 600 and eight hundreds? Are you spending the whole? Are you not hoarding up this money which is being paid by the poor villagers? Are you not growing fat with the money that these poor people pay by way of tax which they do to be returned to them in various ameliorative measures like the proposition before the House?

Deputy President.—You are going much out of your way.

Mr. P. Kumaran Ezhuthassan *(Wadakkancheri).*—I am only showing, Sir, how funds can be found for this very useful object. I am asking you Hon'ble Members of the treasury

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benches in all seriousness whether you will not be pleased in your individual capacity to forego a small portion of your salary. If you are not prepared to do will you at least please advise the Government to practice economies. Then it will be possible to find money. Do something like that. Make a beginning. Show to the outside world that you have also got a heart for the poor and not become the laughing stock of the whole world. Want of finances cannot be an argument for no good cause has suffered for want of funds. If you have got a mind you can find funds. Therefore I appeal to you not to oppose this Bill. Be pleased to allow this to go to a Select Committee. There you can make the necessary changes to make the Bill more effective. Then try to put the whole thing into practice. I support the motion before the House and appeal to it for a unanimous vote.

* **Dr. D. Raghavendra Rao** (*Chief Medical Officer*).—Sir, first of all I have to assure the Hon'ble Member for Pallippuram who is a brother of mine in the profession that I am engaged in that I have not taken up this matter as lightlv as he imagines. It is true that I smiled but it was not because that I took it lightly but because of the wits that he made. Now there have been a few misconceptions here regarding this Bill. I shall try in my humble way to explain what they are. The annual birth rate in the State as put in the administration report comes to 21,000. This figure is not quite correct because all the births will not be reported.

Mr. P. Kumaran Ezhuthassan (*Wadakkancheri*).—Why?

Dr. D. Raghavendra Rao (*Chief Medical Officer*).—It is always so. About 25,000 can be considered to be the birth rate in the State. Calculating the service of midwives on an area basis, it is not a correct way always nor can you be guided by the number of births, because in a town part although the area is small the population will be large but in a rural area especially in this State where houses are ordinarily situated at very great distances and at times births may take place at the same time, one and the same midwife will not be able to handle both the cases. So if all births have to be attended to by qualified midwives the number of hands will have to be very much increased than what is available now. But how far shall we be in a position to train and increase our midwives remains to be seen. I do not think that with the present material that is before us we shall be in a position to train more

* Speech not corrected by the Hon'ble Member.

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than 12 midwives a year; i. e., six in each of the Hospitals at Trichur and Mattanchery.

Dr. A. R. Menon *(Pallippuram).*—In Ernakulam also you can begin that.

Dr. D. Raghavendra Rao *(Chief Medical Officer).*—It is not sufficient if these midwives are given theoretical training. But they should be given practical training. Even if this is started in Ernakulam also then it will only be 18. I may in this connection bring to the notice of the House the fact that the training that is being given now in this State is not recognised by the Madras Government. There has been a misconception in this House that we have considered this Bill as one that will do damage or injury to the poor classes. The passing of this Bill will in no circumstances put any harm on the poor people, because after all the Bill when passed will be only allow the registration of qualified midwives to be entered in the register. This Bill gives them absolutely no other right. On the other hand it would not be preventing any unqualified midwives from practising. As at present worded this Bill will only add to the number of Acts. In course of years we may come to such a position when we are in a position to train as many midwives as it is needed for the State. Then we can bring this penal clause. I do admit that it is possible. As I said it is true that such a Bill has been enacted in the Madras Presidency. But what good has it done? Has it added to the comforts of the women population to any extent? But in western countries it is not so. No unqualified person can attend to a labour case. For the present if this bill is enacted it can be an ornament on the Statute book and I do not think that it can do any good.

Mr. P. Kumaran Ezhuthassan *(Wadakkancheri).*—I hope it will not disfigure the Statute book.

Mrs. D'Souza Williams *(Nominated).*—When I introduced this Bill in this Council I thought that I would get the wholehearted support of the Government because I knew from the very beginning that this is a very useful piece of legislation. Although the Law Member said that this is a futile piece of legislation I cannot subscribe to that view with my experience in that line for the last so many years. On account of the bad handling of the labour cases by these untrained midwives a lot of havoc has been done and very many cases of septic poison has resulted. He also stated that if this bill is passed it will

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be an ornament to the Statute Book. Now let us go to the Madras Act. It was passed in Madras some 11 years ago. One cannot say that this Bill has not done any good to the people of Madras. It may be quite true to say that at the beginning it did not give them the desired benefit. But I can say for certain that now in the whole of the Madras Presidency there are only very few untrained midwives because of this piece of legislation. If, however, a case is attended by an untrained midwife and it results in some complication, at once enquires are made as to who handled the case, and on knowing the person she will be taken to task. On account of this there are only very few midwives who are not trained. Now I am quite confident, Sir, that this piece of legislation is sure to be of some help in the long run. It was, I believe, 21 years ago we started training midwives in this State. At first we trained the indegeneous midwives. Originally they used to be given training only for a period of six months. It was then found that these people were not able to carry out the work in the way it was expected of them. When I returned from London I appealed to the Government that the training of midwives must be extended for a period of one year. At present we have nearly 200 trained midwives. I submit, Sir, that every encouragement should be given to these people to settle in the different villages so that they may be of some help to the people. Some sort of encouragement should also be given by the Panchayat Department and also by the various Municipalities in the State. If some sort of encouragement is given by these bodies also I am sure that without much financial commitment even at the initial stages they will be of much service to the people.

Now, Sir, the Hon'ble Member for Medicine also was telling us that this is a futile piece of legislation and that it would only be an ornament to the Statute Book. I think that when he says this he is forgetting the days when he himself had to run about and attend very many complicated cases on account of mishandling. That is before we women came to the field. But after we entered the service most of the cases are being handled by us. One objection that has been brought forward to the Bill is that it does not contain penalising clause. I thought of the matter when I sent this Bill but I thought that the penalty clause may be reserved to some future date. For the simple reason that there is not a clause to the effect that untrained midwives cannot practice it is no reason to say that this Bill should be opposed. I have stated what I have to say in connection

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with this Bill and I leave it entirely to the decision of the House.

Motion that the Bill be read in Council was put and carried.

Secretary to the Council.—The title of the Bill is "the Cochin Midwives Registration Bill".

Mrs. D'Souza Williams *(Nominated).*—Sir, I move that the Bill may be referred to a Select Committee consisting of the following members:

The Chief Medical Officer, Dr. A. R. Menon, Mr. K. Ayyappan, Mr. P. J. Alexander and the Mover.

Dr. A. R. Menon *(Pallippuram).*—Sir, I move that the other Lady Member may also be included.

Mr. A. V. Moothedan *(Chalakkudi).*—I second it.

Motion was put and carried.

Deputy President.—The Chief Medical Officer will be the Chairman of the Committee and the Committee is to report within two months.

The House rose for the day at 5-5 p. m.

B. V. KRISHNANKUTTY MENON,

Secretary to the Council.

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